

Operation: Suprapubic cystotomy was done November 3rd, 1908. The bladder was found to be about three-quarters of an inch thick and it was very evident that his one ounce of residual urine was due to the great thickness of the bladder wall, which could not contract sufficiently to allow its walls to come together. There was no obstruction.

A large rubber drainage tube was placed in the bladder through the suprapubic opening and the same allowed to drain. The tube was removed on the fourth day and the opening gradually contracted until it became small enough for a tube the size of the present suprapubic drainage tube to enter, and since that time, November 3rd, 1908, the patient has been a suprapubic drainer; but not without its great discomforts in the beginning.

Various appliances and drainage tubes were tried, and while urine came through all of them, just as much came around the tube, and the patient was always wet, at times very wet; and the appliance which I demonstrated to you was gradually evolved, piece by piece, so that this patient has been absolutely dry for one and one-half years and he is free from pain and discomfort, and gets about as well as any other man.

Discussion.

Dr. R. L. Rigdon: I can add nothing of importance to the discussion as I have had no experience with such a drainage apparatus. Some years ago I operated upon a patient for prostatic hypertrophy, and following the operation a permanent suprapubic fistula remained. The prostatic obstruction was not entirely removed and the patient is compelled to rely upon catheterization of his bladder through the suprapubic fistula. He can retain his urine without leakage for 5-6 hours and then by introducing a catheter through the wound the urine can be withdrawn and the patient is perfectly comfortable. There is no leakage unless he neglects to introduce his catheter. In this patient no form of urinal is necessary since he has practical control of his bladder.

Dr. Julius Rosenstirn: I have very little to add to this discussion. The imperative demand for relief in Dr. Meyer's case, strictly indicated this kind of treatment. It was not possible to use catheterization on account of the necessary frequency and its consequent painfulness; the bladder being so very small and sensitive, with no possibility or prospect of gradually increasing its capacity.

This device is most creditable to both the doctor and his patient, with whose help it was devised. In cases demanding similar therapeutic measures, Dr. Meyer's instrument should be applied as one giving relief in this, fortunately, very rare and most tormenting combination of diseases.

Dr. J. C. Spencer: I wish to express my admiration of the ingenuity demonstrated by relieving so distressing a condition. In this case necessity was the mother of invention. I had the good fortune to see this apparatus before this evening and was struck by its simplicity and effectiveness. If there is any condition that is distressing not only to the patient but also to the doctor, it is a leaky suprapubic opening. If this new device for giving relief to patients requiring a suprapubic drainage apparatus is a success it marks a step in the advance of the treatment of this condition.

Dr. Henry Meyer: In answer to the questions which Dr. Rigdon has asked, the capacity of the bladder has not increased. The bladder capacity cannot be increased because the patient has such a thick bladder and it is practically always empty. This tube might be valuable to relieve a patient who had been operated upon for malignant disease

in the bladder, or inoperable carcinoma with frequent urination, tenesmus, etc. Something of this kind might answer for giving relief while the patient is still alive.

PROCEEDINGS OF THE SAN FRANCISCO COUNTY MEDICAL SOCIETY.

During the month of November the following meetings were held:

Combined meeting of the Medical and Surgical Sections, Nov. 7, 1911.

I. Demonstrations. (a) A case of Polycythemia. W. C. Voorsanger. Discussed by Drs. Abrahamson, Kreutzman, Power and Voorsanger. (Published elsewhere in this issue.)

(b) Extraordinary Temperatures. Milton B. Lennon. Discussed by Dr. Clarence Quinan. (Published elsewhere in this issue.)

(c) Rat Leprosy. G. W. McCoy.

II. The Legal Responsibility of the Physician. A. A. D'Ancona. Discussed by Drs. Welty, Kruetzman, Lartigau and D'Ancona.

General Section, Nov. 14th, 1911.

I. A Plea for the Earlier Radical Surgical Treatment of Gastric Ulcer. H. B. A. Kugeler. Discussed by Drs. Alvarez, Ryfkogel, Allen, Castle, Kugeler. (Published elsewhere in this issue.)

II. Some Blood Pressure Observations on Patients with Relaxed Abdominal Musculature. F. W. Birch and T. G. Inman.

Eye, Ear, Nose and Throat Section, Nov. 28th, 1911.

I. Demonstration of a Case of Mastoiditis. Henry Horn.

II. Lantern Slide Demonstration of Histology and Pathology of the Semicircular Canals. Henry Horn.

SAN FRANCISCO COUNTY.

Board of Directors elected December 12th, 1911:

Rene Bine, W. W. Kerr, H. B. A. Kugeler, H. E. Alderson, H. C. Moffitt, W. I. Terry, M. R. Gibbons, G. E. Caglieri, G. E. Ebright, J. C. Spencer, P. M. Jones, A. A. O'Neill, G. B. Somers, F. D. Tait, H. W. Allen, C. G. Kenyon, J. B. Frankenhimer, M. B. Lennon, C. F. Welty, H. D'A. Power, T. D. Maher.

OFFICERS ELECTED DECEMBER 18, 1911.

President, Dudley Tait; 1st Vice-President, Harry E. Alderson; 2nd Vice-President, Morton Gibbons; Secretary, René Bine; Librarian, Leo Eloesser.

SAN DIEGO COUNTY.

A certified dairy has been opened in San Diego. A municipal laboratory has been established for the handling of all bacteriological work, testing of milk, tuberculin and mallein tests of cattle, etc. Dr. H. A. Thompson has been placed in charge.

A city ordinance has been passed licensing dairies and distributors of milk. The proceeds, amounting to about \$800.00 per year, are to be applied to the health fund of the city.

B. J. O'NEILL, Secretary.

SAN LUIS OBISPO COUNTY.

At a meeting of the County Society held December 2nd, the following officers were elected. Dr. H. S. Walters, president; Dr. C. J. McGovern, vice-president, and Dr. W. M. Stover, secretary-treasurer. The meetings of the society are now held on the first Saturday of each month. Considerable interest is awakening in the society work and it is hoped that before the end of the year every man in active practice in the county will be a member of the society.